application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

SW121-2834

CLAIMS AS FILED - PA (Column 1)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			206	'		· ·		RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TO	TAL CHARGEA	W /minus 20=		-184			X\$ 9=		OR	X\$18=	1474	
IND	EPENDENT CL	/\/ minus 3 =					X40=		OR	X80=	440	
MU	LTIPLE DEPEN	IESENT		agency of the			+135=		18. A	+270=		
	the difference	in column i isl	ess than zero, enter "0" in co			olumn 2		TOTAL		OR OR	TOTAL:	2110
CLAIMS AS AMENDED - PART II								TO TALE		, . , .	OTHER	THAN
(Column 1) (Column 2) (Column 3)								SMALL	ENTITY	ΘR	ŞMALLI	
ENTA		CLAIMS REMAINING.		NUM PREVI	IEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
WO	Total		Minus	10 10 10 10 10 10 10 10 10 10 10 10 10 1		enie voja pot ≟ilo voja	8 4	X\$ 9=		OR	X\$18=	
AME	(Independentes		Minus.	F3(48)		A SHAPE BANK		X40=		OR	X80=	
		NTATION OF MU			T CLAIM]	+135=	2 4 2 4	i.	· +270=··	M. W. Will
								TOTAL	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	ا مما	TOTAL	
(Column 2) (Column 3)								ADDIT. FEE			ADDIT. FEE	A page side positi
æ.	The state of the s	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST	PRESENT EXTRA	֓֟֓֓֓֓֓֓֓֓֓֓֓֟֓֓֓֟֓֓֓֟֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	RATE	ADDI- TIONAL FEE	•	RATE	ADDI- TIONAL FEE
*AMENDMENT	Total	*	Minus	**		=	1	X\$ 9=	- La tua	OR	X\$18=	Strate China
ME	Independent	•	Minus	***		=		X40=	·.	OR-	X80=	Tre 1
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=	
				· .	•]	TOTAL	er gan	ΛD	TOTAL	
7.57 19.44		(Column 1)	un controller Controller	(Colu	ımn 2)	(Column 3)		ADDIT. FEE			ADDIT. FEE	
Ü		CLAIMS REMAINING AFTER AMENDMENT	į	HIGI NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA	<u>]</u> [RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	•	Minus	**		=] [X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=]	X40=			X80=	
_	FIRST PRESE	NTATION OF M	JLTIPLE DEF	PENDEN	T CLAIM		J∤			OR	· · · · · · · · · · · · · · · · · · ·	
	If the entry in colu	mn 1 ie lage than ti	h entry in colu	·mn 2 writ	te "O" in co	dumn 3	L	+135=		OR	+270=	·
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
	The "Highest Num	thor Previously Pa	id For" (Total o	r Indenen	dent) is th	highest numb	er fou	ınd in the an	monriate box	r in co	lumn 1.	in the state of

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